GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2771
ANSWERED ON:02.12.2016
Healthcare Facilities
Patel Shri Dilip

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

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(a) the special schemes on anvil to provide holistic healthcare facilities for women and children in the country and the details of funds allocated in the last three years for each of these special schemes, State-wise;

(b) whether Government is getting any financial and techno sociologist support from the World Health Organisation (WHO), UNESCO and other international agencies in the last three years, State-wise;

(c) if so, the details thereof and the current status of their support and assistance to provide the healthcare development for women and children in the country;

(d) whether the Government has carried out any survey on the prevailing healthcare facilities and availability of infrastructure for the rural people of the country and if so, the details of the parameters fixed for such survey and the outcome thereof; and

(e) the initiatives taken by the Government to improve the primary healthcare system and medical facilities for the people living in the rural areas of the country?

Answer

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
(a): Government of India has implemented various schemes for pregnant women and children in the country and the same are placed below:

â€¢ Janani Suraksha Yojana (JSY) was launched in April 2005, with the objective of reducing maternal and neonatal mortality by promoting institutional delivery among pregnant women by providing incentive to all BPL/SC/ST pregnant women delivering in Government health facilities/accredited private institutions in both High performing State (HPS) and Low Performing State (LPS) regardless of age of mother and number of children. All pregnant women delivering in government health centres of LPS are entitled for cash assistance.
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â€¢ Janani Shishu Suraksha Karyakaram (JSSK) has been launched on 1st June, 2011, which entitles all pregnant women delivering in public health institutions to absolutely free and no expense delivery including Caesarean section. The initiative stipulates free drugs, diagnostics, blood and diet, besides free transport from home to institution, between facilities in case of a referral and drop back home. Similar entitlements have been put in place for all sick infants accessing public health institutions for treatment.

â€¢ The Pradhan Mantri Surakshit Matritva Abhiyan(PMSMA) has been launched by the Ministry of Health & Family Welfare (MoHFW), Government of India to provide fixed-day assured, comprehensive and quality antenatal care universally to all pregnant women on the 9th of every month. As part of the Abhiyan, a minimum package of antenatal care services would be provided to pregnant women in their 2nd / 3rd trimesters, by OBGY specialists/ Radiologist/ Physicians at government health facilities, with support from private sector doctors to supplement the efforts of the government.

â€¢ Rashtriya Bal Swasthya Karyakram (RBSK) has been launched to provide child health screening and early interventions services by expanding the reach of mobile health teams at block level. These teams also carry out screening of all the children in the age group 0 − 6 years enrolled at Anganwadi Centres at least twice a year. RBSK covers 30 common health conditions.

â€¢ In order to increase awareness about the use of ORS and Zinc in diarrhoea, an Intensified Diarrhoea Control Fortnight (IDCF) is being observed during July-August, with the ultimate aim of 'zero child deaths due to childhood diarrhoea'. During fortnight health workers visited the households of under five children, conducted community level awareness generation activities and distributed ORS packets to the families with children under five years of age. Around 1.9 crore and 6.34 Crore Under-five children were reached by ASHAs during IDCF 2014 and 2015 respectively and prophylactic ORS packets were distributed to them with counselling for care during diarrhoea.

â€¢ National Deworming Day (NDD): Ministry of Health & Family Welfare had adopted a single day strategy called National

Deworming Day (NDD) in 2015 to combat Soil Transmitted Helminths (STH) infections in the children. During NDD, a single dose of Albendazole is administered to the children by school teachers and anganwadi workers.

â€¢ RKSK- Government of India is implementing the Rashtriya Kishor Swasthya Karyakram(RKSK). The salient features of the various interventions under RKSK are as follows :

? Weekly Iron Folic Acid Supplementation programme: The objective of the programme is to reduce the prevalence and severity of anaemia in adolescent population (10-19 years). The programme covers adolescent girls and boys enrolled in 6th to 12th class in government/government aided/municipal schools and out of school adolescent girls. Under the programme supervised WIFS are given to these adolescent girls and boys using fixed day approach and biannual deworming for control of helminthic infestation.
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The adolescents are screened for moderate/severe anaemia and are referred to appropriate health facilities. Nutrition Health Education is also imparted to the adolescents by trained nodal teachers.

? Scheme for Promotion of Menstrual Hygiene: The scheme aims at increasing the awareness regarding hygiene practices during menstruation, increased access to and use of hygienic products during menstruation and disposal of such products in an environmentally friendly manner among adolescent girls living rural areas.

? Peer Education: The programme aims to ensure that adolescents between the age of 10-19 years benefit from regular and sustained peer education thus improving life skills, knowledge and aptitude on key focused areas.

? Adolescent Friendly Health Clinics: At AFHCs with the presence of trained service providers counselling and curative services (information, commodities and services) are provided at primary, secondary and tertiary levels of care with due referral linkages

Details of funds allocation for Maternal Health and Child Health under RCH Flexible Pool for FY 2013-14 to 2015-16 is at Annexure 1 and 2 respectively.
(b) & (c): Health being a State subject, the technical and financial support by various development partner including international agencies are given to the States where they are implementing the program for women and children and the data on financial and technical support is with the concerned States.

(d): The Government brings out a regular annual publication titled" Rural Health Statistics" which provides detailed data on rural health infrastructure, human resources facilities, training etc. This caters to the needs of health planners, policy makers, other government and non- government organizations and research institutions working in the field of health & family welfare.
(e): The key steps taken by the Government under National health Mission to improve the primary healthcare system and medical facilities for the people living in the rural areas of the country are:
Health System Strengthening Component- Financial assistance for health systems strengthening which inter alia includes augmentation of infrastructure, human resources and programme management, patient transport services (including Dial 108 for critical care and Dial 102 for predominantly transporting pregnant women and sick infants), Mobile Medical Units, community participation including engagement of ASHAs, involvement of Rogi Kalyan Samitis, mainstreaming of AYUSH and availability of drugs and equipment etc.
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Reproductive, Maternal, Newborn, Child and Adolescent Health Services-A Continuum of care approach has been adopted under NHM with the articulation of 'Strategic approach to Reproductive Maternal, Newborn, Child and Adolescent health (RMNCH+A) in India, bringing focus on all the life stages, notably the adolescents.

Control of Communicable Diseases- This includes programmes for control of communicable diseases namely National Leprosy Eradication Programme, Revised National Tuberculosis Control Programme, National Vector Borne Disease Control Programme and Integrated Disease Surveillance Project.

Control of Non-Communicable diseases: To address the emerging challenge of growing disease burden of Non Communicable Diseases (NCD), a newly constituted NCD flexi-pool has been introduced under the National Health Mission. All interventions up to District Hospital level and below for non-communicable disease programmes are funded through this NCD flexi-pool under NHM.

National Urban Health Mission: To cater to primary health care needs of urban population, particularly the poor and vulnerable sections amongst them

Infrastructure Maintenance: Financial assistance is provided under this head for salary support to regular ANMs, LHVs etc.
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